**Sample Patient Education Documentation Form**

**PATIENT FACTORS THAT MAY AFFECT EDUCATION PROCESS (CHECK IF APPLICABLE) EVALUATION SCORE KEY**

* Cognitive impairment ❑ Physical impairment 1 = Unable to teach
* Visual impairment ❑ Family dynamics 2 = Teaching offered – refused
* Speech ❑ Hearing impairment 3 = Requires reinforcement of content
* Primary language other than English ❑ Cultural/religious factors 4 = Demonstrates with assistance
* Literacy ❑ Emotional state 5 = Explains independently
* Readiness/motivation/desire to learn ❑ Other 6 = Demonstrates independently

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| EXPECTED OUTCOMES | TEACHING SESSIONS/LEARNER EVALUATION |
| Patient/family can: | Initials | Evaluation Score | Initials | Evaluation Score | Initials | Evaluation Score | Initials | Evaluation Score |
| Date | Date | Date | Date |
| Verbalize an understanding that confidentiality will be maintained. |  |  |  |  |  |  |  |  |
|  |  |  |  |
| Verbalize an understanding of the difference between TB infection and TB disease. |  |  |  |  |  |  |  |  |
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| Verbalize an understanding of TB transmission. |  |  |  |  |  |  |  |  |
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| Demonstrate techniques to preventtransmission (e.g., proper use of mask, covering mouth and nose when coughing, correct use and disposal of tissues). |  |  |  |  |  |  |  |  |
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| Verbalize an understanding that TB is curable. |  |  |  |  |  |  |  |  |
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| Verbalize an understanding of the consequences of not undergoing treatment for full length of time. |  |  |  |  |  |  |  |  |
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| Verbalize an understanding of causes and impacts of MDR-TB. |  |  |  |  |  |  |  |  |
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| Agree to participate in DOT. |  |  |  |  |  |  |  |  |
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| Verbalize an understanding of the medication regimen and potential side effects. |  |  |  |  |  |  |  |  |
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| Verbalize an understanding that non- adherence can result in legal consequences (e.g., involuntary confinement). |  |  |  |  |  |  |  |  |
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| Identify contacts. |  |  |  |  |  |  |  |  |
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| Verbalize an understanding of the importance of knowing HIV status and its effect on TB treatment. |  |  |  |  |  |  |  |  |
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